PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 NOV 21 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000095764

1. Corporation Name
SAMPLECHOICE.COM, INC

2. Principal Office Address	3. Mailing Office Address
6151 MIRAMAR PKWAY	(SAME)
Suite, Apt. #, etc.: 202	Suite, Apt. #, etc.: (SAME)
City & State: MIRAMAR	City & State: (SAME)
Zip: 33023 Country: USA	Zip: SAME Country: SAME

000009352620
12/04/02--01065--019 **150.00

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number — Applied For ☐ Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: RYAN LIVINGSTON
000009352621
12/04/02--01065--020 **150.00
Street Address (P.O. Box Number is Not Acceptable): 420 NW 131 ST.
Suite, Apt. #, Etc.: PVT. HOUSE
City: MIAMI State: FL Zip Code: 33168

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Ryan Livingston (REGISTERED AGENT MUST SIGN) Date: 11/20/02

CR2E041 (8/01)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRES.	RYAN LIVINGSTON	420 NW. 131 ST.	MIAMI, FL 33168
PARTNER	TYRONE LIVINGSTON	6151 MIRAMAR PKWY	MIRAMAR, FL 33023

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Ryan Livingston 11/20/02 954-961-0028
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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November 20, 2002

RE: SAMPLECHOICE.COM, INC.

To Whom It May Concern:

I am requesting a waiver of the usual fees that are associated with the reinstatement of corporate papers due to the fact that we (Samplechoice.com, Inc.) were not in receipt of the annual corporate papers for renewal for 2001.

Enclosed, you shall find our payment totaling $300 in the following form:

- Money Order in the amount of $150
- Check #2352 in the amount of $150

Thanking you in advance for your immediate attention with this matter.

Respectfully,

Ty Livingston
General Partner

6151 Miramar Parkway, Suite 202, Miramar, FL 33023 ❐ Toll Free (888) 529-1030 ❐ Fax (954) 961-1260